

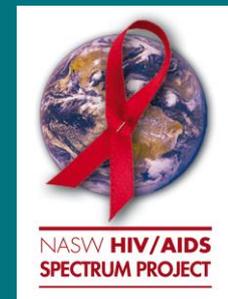
Institute of Medicine of the National Academy of Sciences

# Housing, Mental Health, and Immigration Policies on HIV/AIDS Care, Access, and Retention Panel

## Impact of Mental Health Policies

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 **N A S W**  
National Association of Social Workers

# Living with HIV/AIDS



Testing

Asymptomatic

Symptomatic

Chronic

AIDS Diagnosis

OIs

common psychosocial reactions/concerns

mental health problems/disorders

preexisting mental health problems and/or substance use

neuropsychiatric complications or CNS infection

# What is Mental Health?

***Mental illness***—refers collectively to all mental disorders. Mental disorders are health conditions that are characterized by alterations in thinking, mood, or behavior (or some combination thereof) associated with distress and/or impaired functioning.

***Mental health***—the successful performance of mental function, resulting in productive activities, fulfilling relationships with other people, and the ability to adapt to change and to cope with adversity

# ***Why focus on mental health?***

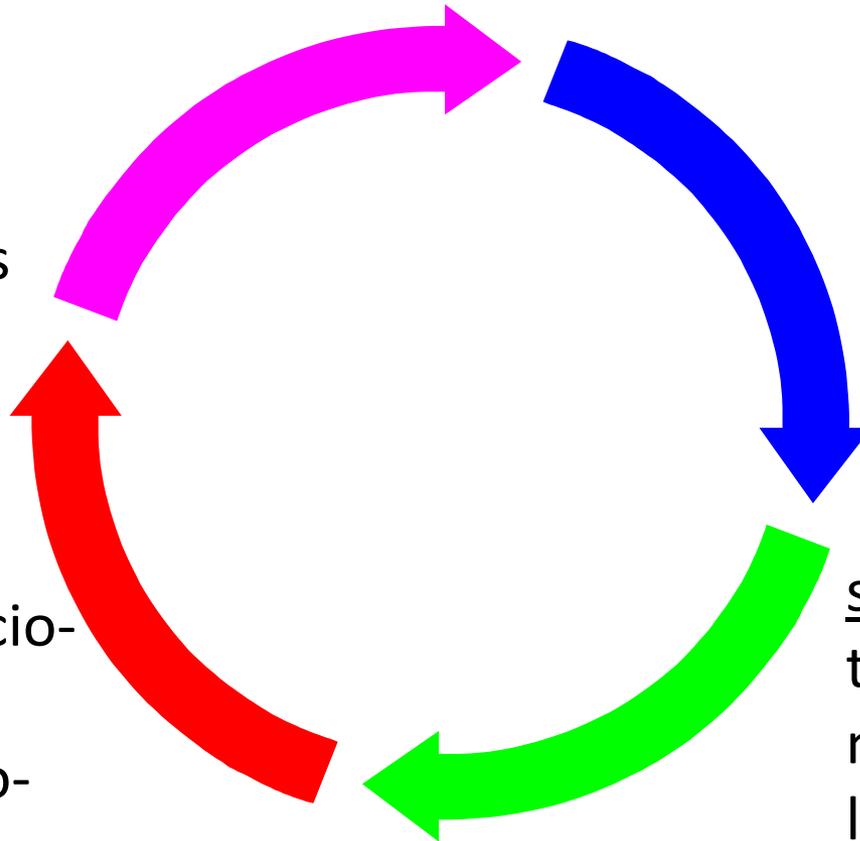
- ✓ 26% of clients living with HIV experienced some form of anxiety disorder within a 12 month period.
- ✓ 19% of adults with HIV had signs of substance abuse
- ✓ 13% of adults had co-occurring substance abuse and mental illness.
- ✓ At least 30% of all people living with HIV require mental health services to treat the emotional and cognitive impact of HIV/AIDS.

# Holistic view of health

bio (biology)  
refers to the  
physical and  
medical aspects  
of ourselves

psycho  
(psychology)  
refers to the  
emotional  
aspects of our  
lives

spiritual refers to  
the way people find  
meaning in their  
lives



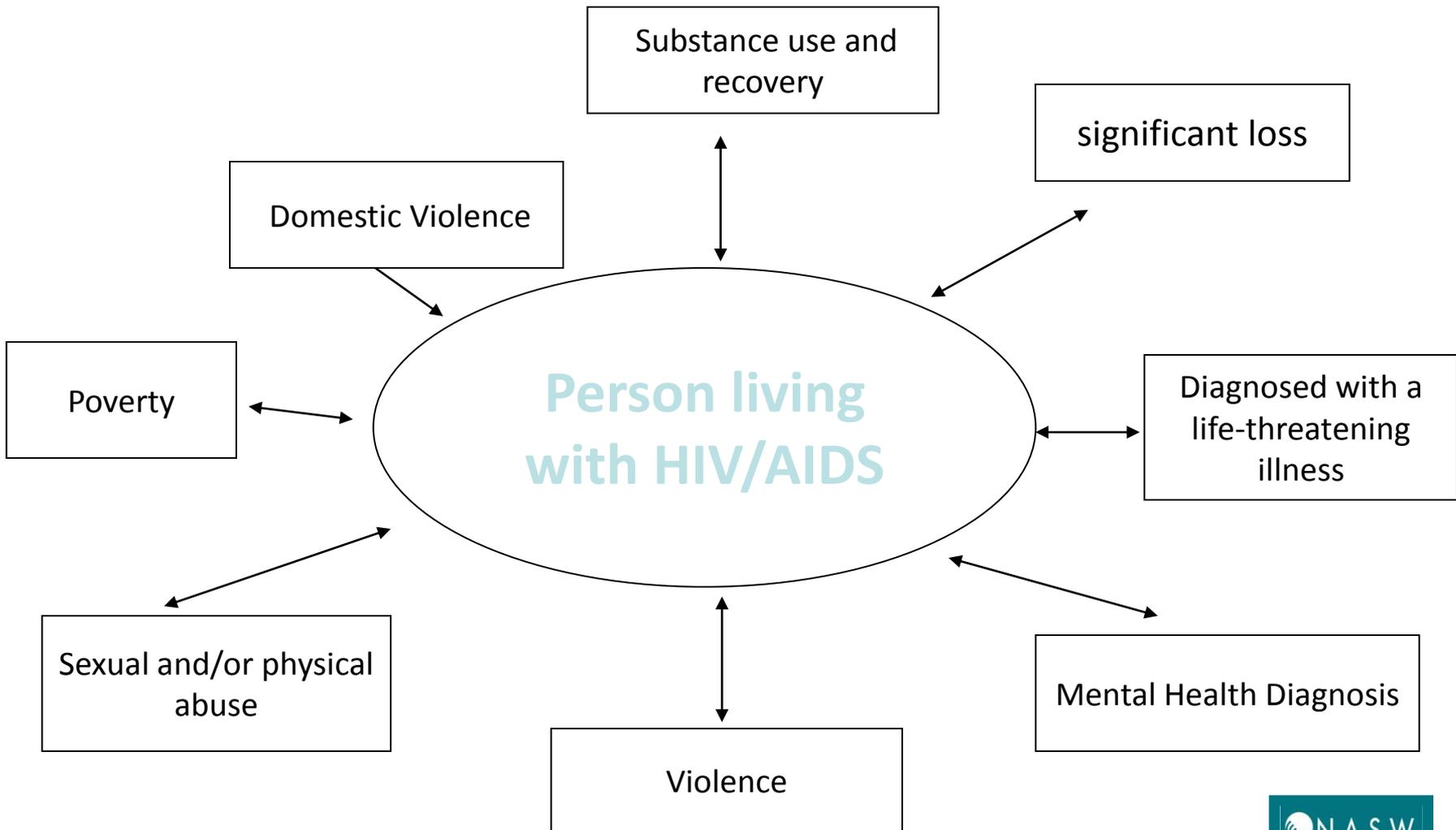
social refers to socio-  
cultural, socio-  
political, and socio-  
economic issues

## Culturally competent practice – issues to consider

What are the client's primary cultural beliefs and values?

How does the client or patient view or conceptualize disease?

Is there a historical context of culture and health care?



# What we know....

Behavioral health is essential to health.

People recover from mental health problems and substance use disorders.

Engagement in mental health treatment keeps client or patients engaged in HIV treatments.

Reference: [www.samhsa.gov/www.hrsa.gov](http://www.samhsa.gov/www.hrsa.gov)

# Final thoughts...

## Policies and Practice

- Programs and funding that promote cross-disciplinary models.
- Policies and regulations that recognize mental health “consults” as equal to medical “consults”.
- Ensuring true mental health parity: funding, reimbursement, and service approach.

# Final thoughts...

## Building strong provider capability

- The perception of 'health workforce' must be reframed to include behavioral health care providers.
- Expand opportunities for mental health professionals and allied health professionals to develop skills that view and address HIV from a health AND behavioral health lens.

## Comprehensive services

- Health services..behavioral health screening and treatment..and community based.
- Client education and outreach --mental health is health care.

# Thank you

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NASW HIV/ AIDS Spectrum: Mental Health  
Training and Education of Social Workers Project

[http://www.socialworkers.org/practice/hiv\\_aids/default.asp](http://www.socialworkers.org/practice/hiv_aids/default.asp)

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